

External Evaluation of the Indian Health Service Bemidji Area Injury Prevention Program: Evaluation Report – Executive Summary

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Bemidji Area Evaluation Report – Executive Summary

This Executive Summary outlines the major findings outlined in the Bemidji Area Injury Prevention Program (IPP) Evaluation Report completed in February 2001 by Carolyn E. Crump, PhD and Robert J. Letourneau, MPH of the University of North Carolina Injury Prevention Research Center. Included in this Executive Summary are the Program Stage of Development ratings for the 12 Evaluation Components used to guide the evaluation process:

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| 1. Mission/Vision | 7. Needs Assessment/Defined Service Population |
| 2. Resource Allocation/Accounting | 8. Surveillance Data Collection |
| 3. Management Support | 9. Injury Program Planning and Implementation |
| 4. Staffing/Roles & Responsibilities | 10. Marketing |
| 5. Training | 11. Evaluation/Reporting |
| 6. Partnerships/Collaboration | 12. Technical Assistance/Building Tribal Capacity |

A brief summary of recommendations is also provided in this Executive Summary for each Evaluation Component. Please refer to the full-text version of the Bemidji Area Evaluation Report for the following: a) background on the development of the evaluation process; b) summary of the Bemidji Area Evaluation Process; c) an overview of the Bemidji Area IPP; d) a description of the Program Stage of Development Process; e) contextual factors used to determine stage of development ratings; f) recommendations; and f) a list of resources for Bemidji Area IPP staff.

1. Mission/Vision

Basic	Intermediate	Comprehensive
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The Bemidji Area Injury Prevention Program (IPP) is at the **Basic** stage of development for Mission/Vision. The Bemidji IPP is well poised to embrace a more comprehensive injury prevention program planning approach. To ensure that the highest quality services provided to Tribes in the Area, and to further enhance the stage of development for this Evaluation Component, the evaluators recommend that the Bemidji Area IPP develop a more systematic way of program planning. This planning should be conducted annually, at a minimum, and should include the identification of goals, objectives, and activities for the injury prevention program at the Area, District, and Service Unit/Tribal level. The Area IP Specialist should develop and distribute a set of guidelines for field staff (including Tribal staff) to follow when conducting annual injury prevention activities. Having a set of guidelines will provide field staff with parameters on how to develop annual program plans and priorities, as well as a framework in which to report on project activities to Tribal administrators (e.g. Health Directors). Program planning These guidelines should be revised periodically and provided to new staff when they join the Bemidji Area Injury Prevention Program. A comprehensive program planning process will help educate Tribal health directors about the significance of injuries. Bemidji Area staff should consider developing plans that are based upon the 12 Evaluation Components used for this Area Evaluation. For example, Evaluation Components rated as “basic” could be the priority for the short-term (next 1-2 years) or long-term (next 3-5 years). For each Evaluation Component, staff could list objectives, action steps (with identified staff members responsible for completing), and an appropriate timeline for tasks.

2. Resource Allocation/Accounting

Basic	Intermediate	Comprehensive
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The Bemidji Area IPP is at the **Intermediate** stage for Resource Allocation/Accounting. The IP Specialist does not have control or significant input into the annual budget for the BMJA Injury Prevention Program. The evaluators strongly encourage Area administrators to involve the Area IP

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Specialist in the budgetary process and to specifically identify funds for injury prevention activities. The evaluators recommend that the Bemidji Area should increase injury prevention program staff (e.g., fund a District Injury Prevention Specialist position). This will elevate the development of the Bemidji Area Injury Prevention Program, as the current District Environmental Health Officers/Sanitarians have responsibilities that exceed their available time and ability due to managing both Environmental Health and Injury Prevention Program responsibilities. The evaluators also encourage IHS staff training in proposal development, budget formulation, budget monitoring, and budget reporting be provided, as needed, to Bemidji Area, District, Service Unit, and Tribal Injury Prevention Program staff. The evaluators recommend that project funding provided to Tribes should be based, in part, on project evaluation. Awardees should report the extent to which past special project funding has had measurable effects and whether the project met stated goals and objectives.

3. Management Support

Basic	Intermediate	Comprehensive
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The Bemidji Area IPP is at the **Intermediate** stage of development for Management Support. Success of injury prevention programs often depends on the support provided to the program from management in the Area Office and/or Tribal government. While there appears to be upper management support for the Bemidji Area Injury Prevention Program, the creation of and funding for a District injury prevention position would indicate stronger management support for the Bemidji Area IP program. Some staff indicated that not all Service Unit Directors and/or Tribal Health Board members are “fully on board” with the injury prevention program, therefore, the evaluators suggest that additional exposure (e.g., their involvement in the IP program planning process) and discussion regarding the Bemidji Area, District, and Service Unit/Tribal injury prevention program activities be developed for Health Directors (e.g., through training). This may benefit local injury prevention activities. It may be especially appropriate to focus attention on improving relationships with Health Directors, who do not regularly communicate with injury prevention program staff.

4. Staffing/Roles and Responsibilities

Basic	Intermediate	Comprehensive
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The Bemidji Area IPP is at the **Intermediate** stage of development for Staffing/Roles and Responsibilities. To enhance this evaluation component, the Area Injury Prevention Specialist should be allowed to spend 100 percent time on injury prevention. The evaluators specifically recommend that a District Injury Prevention Specialist position be developed to serve Native Americans in the Bemidji Area. In addition, a half-time position for an IP Specialist located in Michigan would also benefit Michigan IP activities. Given the importance of injury prevention to the overall health of American Indians, it is clear that staffing decisions should be reconsidered, given that District IP positions were not initially funded in 1994. The evaluators also recommend that more comprehensive injury prevention job descriptions for District and Service Unit staff responsible for injury prevention activities be developed for the Bemidji Area to ensure that staff in each District or Service Unit are fulfilling appropriate injury prevention responsibilities and duties. In lieu of or to facilitate creating new/revised job descriptions, the Components of a Local Injury Prevention Program – Field Staff document, developed by Diana Kuklinski, could serve as the foundation for an enhanced Service Unit job description. The evaluators suggest that supervisors use the annual injury prevention workplans developed by some field staff as the basis for providing constructive feedback on injury prevention performance.

5. Training

Basic	Intermediate	Comprehensive
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The Bemidji Area IPP is between the **Basic and Intermediate** stage of development for Training. The evaluators recommend that the BMJA continue to support and further develop the training activities offered in BMJA and in the Area's support for staff and Tribal representation at IHS National Training courses. The evaluators recommend that Area, District, and Service Unit staff develop standard/formalized procedures for announcing training opportunities and recruiting qualified participants for trainings held within and outside the Area. Follow-up to assess the impact of training on course participants (Area-specific and National courses) should be conducted on a more regular basis in the Bemidji Area. The evaluators recommend that a training database be developed in the Bemidji Area as a method of conducting this recommended follow-up. In addition to using national IHS IPP courses as a base for designing and implementing BMJA trainings, the evaluators encourage BMJA course instructors to review materials related to adult learning principles and practices. Use of a combination of techniques will increase understanding and promote engagement with the material among course participants. The evaluators also believe there is a need for the development of additional injury prevention training courses in the Bemidji Area. An Area-specific Level II Data Analysis and Interpretation and Analysis (Level II) course seems feasible, thus reducing the cost and time needed for IHS and Tribal staff to attend the national Level II course. In addition, developing an abridged Level I training course, designed to provide education and information to Tribal decision-makers (e.g., Health Directors, Tribal Council members), would be beneficial to the Bemidji Area. As more Tribes in the Bemidji Area receive IHS Tribal Injury Prevention Grant funding from IHS Headquarters, the need for additional training may increase (e.g., program management, program implementation, identifying resources, writing grants, program sustainability). Meeting these potential training needs should become a priority in the Bemidji Area. The Bemidji Area has not nominated or supported as many Fellowship Program participants as other IHS Areas. As more Fellowship Program participants represent the Bemidji Area in the future, it will be important to ensure adequate mentoring and assistance is provided to those who participate in the Fellowship Course.

6. Partnerships/Collaboration

Basic	Intermediate	Comprehensive
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The Bemidji Area IPP is at the **Intermediate** stage of development for Partnerships/Collaboration. The evaluators suggest that Bemidji Area, District, and Service Unit staff build on their existing relationships and expand them in ways that lead to the implementation of IP projects. Having a set of specific ideas and project proposals, perhaps outlined in the Area IP strategic plan, will assist Bemidji Area and District IP staff by focusing their attention on collaborations leading to the joint implementation of specific IP interventions. An appropriate goal for some of the collaborations would be the establishment of more official cooperative agreements thus making it easier to share resources across organizations. To the extent possible, Bemidji Area IPP staff should consider ways of increasing membership and involvement on local injury prevention coalitions. In addition, each Service Unit does not have an active Injury Prevention Committee or Coalition. The evaluators recognize this as a legitimate challenge facing some BMJA District and Service Unit Staff, but also emphasize the importance of showing community members' commitment. It often helps to build trust in new relationships for "professional" staff to demonstrate flexibility and support as community members learn how and in what circumstances District and Service Unit IP/EH staff are able to assist them in addressing injury prevention in their community.

7. Needs Assessment/Defined Service Population

Basic	Intermediate	Comprehensive
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The Bemidji Area IPP is at the **Basic** stage of development for Needs Assessment/Defined Service Population. Needs assessment data, combined with injury surveillance data, can serve as the foundation from which injury prevention projects and activities are developed, implemented, and evaluated. This type of information can be collected through the use of surveys, focus groups, or one-on-one interviews. The Bemidji Area IPP should also consider developing a Bemidji Area Tribal Injury Prevention Program Steering Committee, which could help to identify the IP needs (training, funding, etc.) for Tribes in the Minnesota, Wisconsin, and Michigan. For the Bemidji Area to move to the next stage of development for this Evaluation Component, staff should consider developing more formal procedures to collect needs assessment data. The evaluators recommend that this information be routinely collected as part of a structured way of developing tailored, local-level injury prevention programs in direct response to community member requests. To quickly utilize information collected from surveys, the evaluators recommend that an easy-to-read format summarizing the data be developed as a tool to market or lobby for the injury prevention program. Developing community profiles is one way to present this information. The evaluators suggest that Bemidji Area staff consider supporting one or more Photovoice projects. Photovoice is a methodology to reach, inform, and organize community members, enabling them to prioritize their concerns and discuss problems and solutions. This “needs assessment” method also promotes critical dialogue and knowledge about personal and community issues through large and small group discussions of photographs and therefore has the potential to reach policy makers. In addition to identifying community members’ perceived injury prevention needs and interests, a community capacity assessment could be completed (see resources by John Kretzman and John McKnight).

8. Surveillance Data Collection

Basic	Intermediate	Comprehensive
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The Bemidji Area IPP is at the **Basic** stage of development for Surveillance Data Collection. The evaluators commend the data collection efforts that are beginning in the Bemidji Area and recommend that the recently developed Severe Injury Surveillance Resource Book be distributed, with training, to District, Service Unit, and Tribal Injury Prevention program staff. An Area-wide training meeting, or two District training meetings, could be conducted with IP staff to discuss the information in the Resource Book. Service Unit staff should standardize observational protocols to provide valid estimates regarding “use rates” in the Service Unit population. The evaluators suggest that this information (e.g., protocols, forms) be added to the Severe Injury Surveillance Reference Manuals and Protocols. Given the developmental nature of the Bemidji Area Surveillance System, the evaluators recommend that eventually staff in the Bemidji Area receive training in the use of advanced computer systems such as GIS. Once training has been provided, instructions and protocols in the use of GIS could be added to Service Unit Severe Injury Surveillance Reference Manuals and Protocols developed for individual Service Units. In addition to the mortality reports specific to the Bemidji Area, the evaluators recommend that staff consider developing Area-wide data reports on an annual basis to summarize the information collected about injury prevention surveillance and activities for Districts and Service Units/Tribes.

9. Injury Program Planning and Implementation

Basic	Intermediate	Comprehensive
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The Bemidji Area IPP is between the **Basic and Intermediate** stage of development for Injury Program Planning and Implementation. To increase the effectiveness of the Bemidji Area injury prevention program activities, the evaluators encourage the staff to support a greater percentage of multiple level interventions (e.g., individual, vehicle/vector, and environmental change) and should use multiple methods (e.g., health education, engineering, policy development, and enforcement). To move to the comprehensive level for Injury Program Planning and Implementation, the evaluators also recommend that Bemidji Area staff develop a strategic approach to reduce injury related morbidity and mortality in the Bemidji Area by specifically incorporating the four types of interventions outlined in the IOM's *Reducing the Burden of Injury Report* (Bonnie et al., 1999) : 1) changing individual behavior; 2) modifying products or agents of injury; 3) modifying the physical environment; and 4) modifying the sociocultural and economic environment. The evaluators realize the challenges that all IHS Areas have faced in addressing the problems of intentional injuries (assault, domestic violence, suicide). It seems an appropriate issue to address through collaborative relationships with IHS Area Departments and other organizations with responsibility for alcohol abuse prevention/treatment and mental health. While perspectives may vary in terms of a clinical versus a public health approach, there are benefits to working together to prevent both intentional and unintentional injuries among American Indian people in the Bemidji Area.

10. Marketing

Basic	Intermediate	Comprehensive
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The Bemidji Area IPP is between the **Basic and Intermediate** stage of development for Marketing. While injury prevention marketing activities have increased recently in the Bemidji Area, additional activities could be developed by Bemidji Area, District, and Service Unit/Tribal staff. The 1-page description of the Bemidji Area Injury Prevention Program is a useful summary of the IPP's main activities. In addition to this summary, the evaluators suggest that future marketing tools, such as Bemidji Area Fact Sheets, be developed to correspond to the major program emphasis areas (e.g., motor vehicle crashes, fire/burn injuries). All materials developed to market the Area's program should be updated and distributed annually to the Area's list of Bemidji Area injury prevention practitioners and partners. The distribution of such marketing materials could coincide with materials distributed as part of the annual program planning process, to highlight activities completed in the previous year or years. The formation of a Bemidji Area-specific Injury Prevention Program webpage for the BMJA Injury Prevention Program has also begun as part of the IHS Injury Prevention Program website. As the site is developed further, the evaluators suggest that Bemidji Area-specific information on the IHS National IPP website be updated on a regular basis (perhaps quarterly or semi-annually). To avoid duplication of effort, BMJA staff should consider including information on the Website that has already been created to promote the program through other channels (e.g., IPP Summary, Success Stories).

11. Evaluation/Reporting

Basic	Intermediate	Comprehensive
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The Bemidji Area IPP is at the **Basic** stage of Development for Evaluation/Reporting. For the Bemidji Area Injury Prevention Program to advance to the next stage of development for this Evaluation Component, more formal evaluation and reporting mechanisms should be put in place to monitor future

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injury prevention demonstration projects funded by the Area and/or District/Service Unit. The evaluators recommend that appropriate training to conduct an evaluation should be provided to as many Area, District, Service Unit, and Tribal staff as possible. The evaluators encourage Area staff to conduct more formal evaluations of projects/interventions conducted throughout the Service Units. The evaluators suggest that the Bemidji Area consider redesigning its Level I course (to follow the re-design currently taking place of the National Level I course) and developing an Area Level II injury prevention course to include skill building for evaluation of community injury prevention programs or projects. The evaluators also recommend that a report preparation workshop be developed to instruct Tribal representatives and Service Unit staff in methods needed to collect and summarize information regarding intervention projects. Documenting successes as well as challenges, including a report of how funds were allotted, will improve program planning at the Area, Districts, and Service Units.

12. Technical Assistance/Building Tribal Capacity

Basic	Intermediate	Comprehensive
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The Bemidji Area IPP is at the Intermediate stage of development for Technical Assistance/Building Tribal Capacity. With the advent of the IHS Tribal Injury Prevention Grants Program funding to Tribes, it is important for Bemidji Area, District, and Service Unit Office IP staff to provide technical assistance to all Tribal Organizations in the Bemidji Area interested in working to prevent injuries and/or to submit proposals for grant funding. The evaluators recognize that several Tribes in the Bemidji Area have compacted their EH services, but also note that several have “bought-back” EH/IP services. To increase the effectiveness of their injury prevention activities, assisting Tribal staff and local coalitions with strategic planning and evaluation reporting represent two critical needs of Tribal members. Establishing a Bemidji Area Tribal Injury Prevention Advisory Committee may also raise awareness of the importance of IP. A Tribal IP Advisory Committee could establish relationships with State and Regional programs that address specific issues important to the safety of Tribal members (e.g., domestic violence, crime prevention). The degree to which Tribes in the Bemidji Area have successfully competed for and been awarded grants from IHS Headquarters IPP indicates that Tribal capacity building is an important part of the Bemidji Area Injury Prevention Program. With the advent of these and other grant funding opportunities, Bemidji Area, District, and Service Unit/Tribal IP staff need to be prepared to provide effective and useful technical assistance to Tribes.

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In summary, the Bemidji Area Injury Prevention Program is at the following Stages of Development for the 12 Evaluation Components used to guide the Evaluation:

Evaluation Component	Stage of Development		
	Basic	Intermediate	Comprehensive
1. Mission/Vision	Basic	Intermediate	Comprehensive
2. Resource Allocation/Accounting	Basic	Intermediate	Comprehensive
3. Management Support	Basic	Intermediate	Comprehensive
4. Staffing/Roles & Responsibilities	Basic	Intermediate	Comprehensive
5. Training	Basic	Intermediate	Comprehensive
6. Partnerships/Collaboration	Basic	Intermediate	Comprehensive
7. Needs Assessment/Defined Service Population	Basic	Intermediate	Comprehensive
8. Surveillance Data Collection	Basic	Intermediate	Comprehensive
9. Injury Program Planning and Implementation	Basic	Intermediate	Comprehensive
10. Marketing	Basic	Intermediate	Comprehensive
11. Evaluation/Reporting	Basic	Intermediate	Comprehensive
12. Technical Assistance/Building Tribal Capacity	Basic	Intermediate	Comprehensive

Bemidji Area Injury Prevention Program staff should use the results, recommendations, and resources provided in this report to develop an Action Plan to enhance the stages of development for each Evaluation Component used in this assessment process.